

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JB		11/15/01
O.I.P.E. CLASSIFIER		13	11/27/01
FORMALITY REVIEW	S-BT	1085	11/27/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	X	1	11/29/01
2	✓	2	11/21/01
3		3	11/21/01
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5	✓	5	
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7	✓	7	
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9	✓	9	
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If more than 150 claims or 10 actions  
staple additional sheet here

Best Available Copy